A

	*		-		
05/18/01			1c812 (9.5. P40	20	
PATERITY	<b>A</b>	<b>10</b> 1	e em	A	

Rage 1 of 2

PATENT APPLICATION TRANSMITTAL

Atty Docket No.: 3379/3

Total Pages: 88

First Inventor or Application Identifier: Antognini

Express Mail Label No.: EL718276331US

## X PATENT APPLICATION

Assistant Commissioner for Patents

Washington, D.C. 20231

Re:

Applicant(s) or Identifier:

Antognini et al.

Serial No.

To be assigned (Continuation of 08/977,510)

Filed

Concurrently Herewith

Title

SYSTEM AND METHOD FOR DIGITAL BILL

PRESENTMENT AND PAYMENT

Kindly file the annexed papers indicated below:
Application for Patent including Specification (75 pages) and Drawing(s) (8 sheets)
Oath or Declaration (3 pages)
Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation)

Deletion Of Inventor(s) -- Signed statement attached deleting inventor(s) named in prior application. (37 C.F.R. §§ 1.63(d)(2) and 1.33(b)).

Return Receipt Postcard

Other:

If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Divisional

Continuation-in-Part

of prior application serial no. 08/977,510

Prior application information:

Examiner: N. Rosen

Group / Art Unit: 2165

<u>For CONTINUATION OR DIVISIONAL APPS only</u>: The entire disclosure of the prior application, from which an oath or declaration is supplied is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.

09/862785

OIPE													
/ 0	PATENT APPLICATION TRANSMITTAL				Page 2 of 2	Atty 1	ty Docket No.: 3379/3						
MAY 18	The filing fee has been calculated as follows:  Claims Paid for Extra Rate (Sm. Ent.) Fee Rate Fee  BASIC FILING FEE \$ 355 \$ \$ 710 \$												
BADEN	AEK	Claims*	Claims Paid for	Extra	Rate (Sm. E	int.) F	Fee	Rate	Fee				
	BASIC	FILING FEE			\$ 355	-   \$	5	\$ 710	\$				
	Total		- 20 =	0	x \$9	\$	50	x \$18	\$0				
	Indep.		- 3 =	0	x \$40	\$	50	x \$80	\$0				
	MULTI	PLE DEPENDI	ENT CLAIM PRESENT	Γ	+ \$135	\$	50	+ \$270	\$0				
					TOTAL	\$	<b>S</b> .		\$				
•	* FILING FEE WILL BE SUBMITTED LATER.												
	* FILING FEE WILL BE SUBMITTED LATER.  A check in the amount of \$ is enclosed.  The Commissioner is hereby authorized to charge the fee of \$00 to the undersigned attorney's Deposit Account No.  Please direct all correspondence to the following address:  Brown Raysman Millstein Felder & Steiner LLP 120 West Forty-Fifth Street New York, New York 10036 (212) 944-1515  Respectfully submitted,  Seth H. Ostrow, Reg. No. 37,410 Brown Raysman Millstein Felder & Steiner LLP Attorney for Applicants 120 West Forty-Fifth Street New York, New York 10036 Phone: (212) 944-1515 Fax: (212) 840-2429												